

	<p style="text-align: center;">Polycystic Kidney Disease All Classes Updated 07/29/2020</p>	
DISEASE/CONDITION	EVALUATION DATA	DISPOSITION
A. Autosomal Dominant (AD-PKD)	<p>Submit the following to the FAA for review:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Nephrologist current evaluation detailing: <ul style="list-style-type: none"> ○ History, diagnosis, physical exam; ○ Current status; ○ Treatment plan and prognosis; and ○ If airman has hypertension, the physician should comment if it is controlled. <input type="checkbox"/> Medication list and side effects, if any; <input type="checkbox"/> Lab (recent) to include at a minimum: <ul style="list-style-type: none"> ○ Serum creatinine; ○ eGFR; and ○ Spot urine protein/creatinine ratio <input type="checkbox"/> Imaging to include: <ul style="list-style-type: none"> ○ Brain MRA (preferred) or CTA (if MRI contraindications) for aneurysm; and ○ Current transthoracic echocardiogram 	<div style="background-color: red; height: 10px; width: 100%;"></div> <p>DEFER Submit the information to the FAA for a possible Special Issuance.</p> <p>Follow up Issuance Will be per the airman's authorization letter.</p>
B. Autosomal recessive (AR-PKD)	<p>Submit the following to the FAA for review:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Nephrologist current evaluation detailing <ul style="list-style-type: none"> ○ History, diagnosis, physical exam; ○ Current status; ○ Treatment plan and prognosis; and ○ If airman has hypertension, the physician should comment if it is controlled. <input type="checkbox"/> Medication list and side effects if any; <input type="checkbox"/> Lab (recent) to include at a minimum: <ul style="list-style-type: none"> ○ Serum creatinine; ○ eGFR; and ○ spot urine protein/creatinine ratio <input type="checkbox"/> Gastroenterologist current evaluation detailing: <ul style="list-style-type: none"> ○ History, diagnosis, physical exam; ○ Current status; ○ Treatment plan and prognosis; ○ Abdominal ultrasound; and ○ Liver function testing plus any additional testing deemed clinically indicated. 	<div style="background-color: red; height: 10px; width: 100%;"></div> <p>DEFER Submit the information to the FAA for a possible Special Issuance.</p> <p>Follow up Issuance Will be per the airman's authorization letter.</p>